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WDVA'S PTSD Contractors Meet in Chelan for Winter Fest

Assembled contractors were gathered on 17-20 March 2005 for the 21st. annual WDVA PTSD Program Contractors' Meeting in wintry Chelan under frosty, gray skies. Contractors were greeted with an abundance of pertinent information and satisfying cuisine for the March meeting. One contractor was overheard stating that she thought that this year's conference was the best yet.

Presenting at the meeting was Susan Cochran, a representative of Tri-Care insurance, which handles many insurance benefits for returning service members. Each contractor had the opportunity to summarize their year's adventures and hardships of counseling war veterans in the atmosphere of a current war.



Above is Dennis Jones, WDVA contractor in Mount Vernon, and outreach counselor for the outlying communities of Skagit County. (Dennis denied the report of another contractor claiming to have observed him humming the Monty Python favorite, *The Lumber Jack Song*.)

On the right are contractors assembled at the dinner table, left to right, Bruce Harmon, Renton, Tom Wear of Seattle, Ellen Schwannecke, Ellensburg, Darleen Tewault, Centralia, and James "Corky" Sullivan of

Michele Klevens, PSHCS Deployment Clinic in Seattle, offered an excellent review of services offered by the VA Medical Centers in the Puget Sound area for returnees from Iraq (OIF) and Afghanistan (OEF). Our very own Clark Ashworth, contractor from Stevens County, offered a thorough review of recent compensation and pension examination work that he has been doing. Saturday offered contractors opportunities to examine within small groups, their treatment concepts and methods. Sunday morning Tom Schumacher reviewed several PowerPoint Presentations that considered in detail the OIF/OEF causality, mortality, and clinical presentation data currently available. Sunday was also a chance to talk about the collaborative work among the Washington State National Guard, Vet Centers, the VA Medical Centers, and the WDVA PTSD Program, and how each contractor contributes to these linkages. A double feature film event (sans popcorn) offered contractors an opportunity to view James Sardo's acclaimed presentation of his mental health tour in support of OIF. The second feature was the viewing of the difficult to find DVD, *Little Dieter Needs to Fly*. This film was well received by contractors, and enthusiastically recommended to those few attendees who missed it due to the late hour. (See review of *Little Dieter* on page 11.)

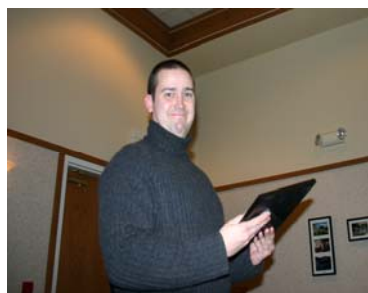
Photos of the meeting are provided by Clark Ashworth and his son, Gregory, along with some artistic contributions from Brian Morgan. Their generous sharing of pictures for this and previous RAQ editions is greatly appreciated by the editor.



Photos Capture Candid Moments for PTSD Contractors



Above, left, are feasting contractors Laurie Akers and Steve Akers of Everett, Snohomish County, John Mickelson of Colville and Bridget Cantrell of Bellingham, Whatcom County. Bridget shared her creation of a workbook for returning war veterans and their families. Above, right, is Dwight Randolph of King County, displaying his certificate of appreciation for his efforts counseling war veterans and their families. Below, left, is King County group leader and contractor Ron Lowell, and Ellen Schwannecke of Ellensburg, showing off her certificate of appreciation, awarded for her fine work counseling veterans and family members. Below, right, is Brian Morgan of Omak, Okanogan County, receiving the prestigious “Shell Shock” award, presented by Tom Schumacher. This award is given once each year to the contractor who maintains exemplary self care. This year the award was presented to Brian as a reminder of his personal epiphany. On hand for the presentation was Brian’s imaginary companion, Bob.



More Celebrity Photos from the 2005 Meeting of PTSD Contractors at Campbell's Resort at Lake Chelan



Counter clockwise from below, left, is Wayne Ball of Wenatchee, Chelan, and Douglas Counties, and Dorothy Hansen, contractor in Federal Way, King County. Left, center, is Clark Ashworth, of Colville, Ferry, Stevens, Pend Oreille Counties. Above, left, is Paul Daley, aka Ben Cartwright, Port Angeles, Clallam and Jefferson Counties. Above center is the mystery guest, T.J. Reinoso. Above, right, is Michele Klevens of the VAMC Redeployment Clinic. Below, right, is Jack Dutro, WDVA contractor in Pacific and Grays Harbor Counties.



Assembled contractors were briefed on the latest efforts to give assistance to the war veterans returning from Afghanistan and Iraq. The group discussed issues related to their work as psychotherapists and the problems encountered in their efforts to give counsel to war veterans and their families in wartime.

Existential Perspective Added to VA PTSD Treatment Program

In response to the observation that treatment with trauma-centered focus tends to be unhelpful and in some cases make patients worse, Dennis Grant, MD, at the Phoenix VA hospital proposed giving a treatment program an “existential perspective to help patients deal with the realities of their war experience” (p. 39). Dr. Grant published his proposal in an article in the magazine *Federal Practitioner* [2005, 22(3), 39-46]. Dr. Grant, who is clinical coordinator of the outpatient PTSD program for the Carl Hayden VA Medical Center in Phoenix, describes PTSD as a physical disease. Regarding his treatment philosophy, he writes: “To approach combat PTSD using cognitive therapy requires the patient and clinician to accept two additional ideas: first, that combat events are part of the reality of the veteran’s life experience and are not erasable; and second, that the memories, thoughts, and feelings of combat are filtered through the irrational thought processes inherent in the human mind, producing negative, problematic, and irrational cognitions” (p. 40). It is the latter, irrational process that Dr. Grant proposes to address in the existential component. He describes, what he calls the Socratic style in group psychotherapy, in which the therapist adopts “a very active and engaging leadership style, in which questions are posed to the group to elicit discussions that lead to a clear expression of truths” (p. 40).

Values

Dr. Grant writes with engaging surety about the need for combat veterans with PTSD to realize their fundamental “ingrained” values as Americans, which he illustrates by quoting the Declaration of Independence. He states that, “from an existential perspective, therefore, PTSD is the outcome of fighting for fundamental values held as self-evident and of facing situations in which the soldier must work to survive, protect the squad, and achieve the mission” (p. 42).

A Balanced Perspective of War Experience

In the group process, Dr. Grant draws out the patient’s exploration of “their own negative views about the war in which they participated and how these views developed” (p. 42). He calls on therapists to explore their own views and attitudes regarding the war, with the goal “to develop alternative and varied perspectives through Socratic discussion in order to balance or lessen substantial negativity that contributes to irrational cognitions” (p. 42). By achieving a more balanced perspective of the positive off-setting the negative views, Dr. Grant hopes to help the patients integrate and thus “improve their sense of personal meaning, self-esteem, self-concept, and historical worth” (p. 42).

Spiritual Growth

Dr. Grant regards spiritual growth as part of human psychological growth that experience in war can “derail”. He asserts patients find a way to “enrich their lives with more meaningful and positive experiences” (p. 42). He also observes that the

majority of veterans he treats believe in God, and that those who do not find spiritual meaning, are left with a material view of existence. He writes, “As with all spiritual explorations, the goal of our work in this part of the program is to help patients find a way to enrich their lives with more meaningful and positive experiences” (p. 42).

Irrational Thinking

Along with the existential component to the PTSD treatment program, Dr. Grant calls for a system of “cognitive restructuring” that addresses “irrational thinking patterns.” “In the case of PTSD, the results are the irrational cognitions underlying suicidal thinking, depression, survivor guilt, the inability to resolve grief, the negative experience of trauma anniversaries, disillusionment, global anger, changes in world view, poor self-esteem and self concept, and religious and spiritual conflicts” (p. 42). To this end he refers to the works of Albert Ellis and David Burns. His groups address the three major issues of suicidal thinking, depression, and survivor guilt. He draws from examples provided from the group participants and has the group assess whether each is rational or irrational, true or false. “As a thought is considered irrational, a rational one is developed to replace it; if it’s deemed rational, an elaboration is offered” (p. 45). Notes from each session are typed up and distributed to the patients for review and discussion and kept for review “each time they experience guilt, depression, or suicidal feelings.”

Journaling Advocated

Dr. Grant writes that the goal of the group “is to teach members to challenge their own thinking using the restructuring methods practiced and to reassess negative ideation regarding their existential understanding of themselves. Our approach defines PTSD as an ongoing condition requiring continual management. As such, we strongly encourage our patients to keep a journal containing the restructuring exercises done in class and to review and add to this journal when irrational cognitions recur” (p. 46).

Comment

Dr. Grant justifies his existential focus with the 2003 VA Cooperative Study that found no treatment effect in the trauma-focused group treatment approach and their local experience that the combat veterans did not wish to participate in the trauma-focused groups. The treatment program draws from the veterans their own values and offers them alternative perspectives with which to balance whatever irrational beliefs they may have. He then offers a broad irrational belief in God, rather in an Alcoholics Anonymous non-sectarian God-as-you-know-it approach. He errs, however, when he sees non-believers as perforce material. Material is nature, and meaning can be found in nature, just as order can be found in disorder. EE ##

Combat Injury Increases Risk of PTSD

Researchers in Israel questioned a prevailing belief in the field of psychotherapy that physical injury in combat is seldom accompanied by PTSD. Danny Koren and associates in Haifa examined 60 injured soldiers and 40 soldiers who were uninjured during the same combat actions. They report that the average time elapsed between the injury and the interview was 15.5 months. Publishing their results in the *American Journal of Psychiatry* ["Increased PTSD Risk With Combat-Related Injury: A Matched Comparison Study of Injured and Uninjured Soldiers Experiencing the Same Combat Events," 2005, 162 (2), 276-282], the authors state that 10 of the 60 injured soldiers and one of the uninjured comparison soldiers met the diagnostic criteria for PTSD using structured interviews. They write, "our findings clearly indicate that bodily injury is a risk factor—rather than a protective one—for PTSD. Moreover, in addition to just advancing the robustness of this notion, that data also suggest that the odds of developing PTSD following traumatic injury are approximately eight times higher than following injury-free trauma" (p. 279). They also speculate that this is a conservative estimate, since many injured soldiers refused to participate in the study (35%), while none of the uninjured refused.

To explain their finding, Koren, et al, cite research literature that suggests that "the perceived level of danger by trauma survivors is a better predictor of PTSD than the actual severity of the traumatic event" (p. 280). The authors admit that their explanation may be overly simplistic, and that "bodily injury exerts its effect on perceived threat via interaction with other factors, such as the effect that it has on one's (perceived and real) ability to function and cope during the traumatic event" (p. 280).

Introducing their topic, the Haifa researchers observed that what they termed "traditional views" "tended to regard bodily injury as a protective factor against the development of... PTSD" (p. 276).

Koren, et al., conclude, "considering that emotional distress is often overlooked among injured patients hospitalized in surgical and trauma units, these findings highlight the importance of paying more attention to psychological aspects of their condition in general and to the early symptoms of PTSD in particular, both during hospitalization and after discharge" (p. 281).

Comment

The gist of the 2 articles reviewed on this page, their titles suggest, promotes a theme of circularity: to be physically injured (in combat) increased the risk of having PTSD by at least a factor of 8. It is also established, or at least proposed, that PTSD increases the risk of being injured, intentionally or unintentionally (accidentally). EE ##

PTSD and the Risk of Recurrent Accidents

Psychologists at the University of Washington Harborview Trauma Center and the University of California Medical Center at Davis recently reported on a study concerning the propensity for accidents among persons with PTSD. Writing in the *Journal of Traumatic Stress* [2005, 17(6), 529-534], Sarah Ramstad, Joan Russo, and Douglas Zatzick examined 151 randomly selected surgical inpatients who were hospitalized acutely after "intentional and unintentional" injury. They compared these patients with a National Comorbidity Study (NCS) epidemiological survey, which "established that traumatic life events were endemic among American civilians" (p. 529). "We hypothesized that intentionally and unintentionally injured acute care patients would have both greater levels of prior trauma and an elevated risk for a broad spectrum of individual traumatic life events compared to the general population" (p. 530). The authors defined "intentional" injuries as "injuries associated with human malice such as physical assaults," and "unintentional" as motor vehicle crashes and "injuries sustained on the job" (p. 529). Traumas surveyed in the NCS sample included combat, life-threatening accident, natural disaster, witnessing injury or death, rape, sexual molestation, physical assault, childhood abuse or neglect, having been threatened with a weapon, and "great shock due to events occurring to others, or any other overwhelming event" (p. 531).

Ramstad, Russo, and Zatzick report: "In the NCS sample only 11% had four or more previous traumas, in comparison to 40% in the unintentionally injured, and 61% in the intentionally injured sample. The unintentionally injured sample was approximately four times more likely to have four or more previous traumas,... and the intentionally injured sample was almost eight times more likely to have four or more previous traumas..." (p. 531).

The authors conclude: "Beyond these considerations, this investigation documents that acute care patients carry a substantial burden of prior trauma before the injury event that brings them into the hospital. Intentional and unintentionally injured acute care patients are at markedly increased risk for a broad spectrum of traumatic life events when compared to the general US population. In fact, a global review of the prevalence of traumatic life events among third world populations reveals that patients hospitalized in American trauma wards have cumulative trauma burdens more similar to levels encountered in conflict ridden low income countries..." (p. 533).

Comment

The National Comorbidity Study mentioned above refers to a very broad spectrum of potentially traumatic events, combat being only one. Both articles on this page call for evaluation of PTSD among injured patients. EE ##

Book Review:

The Bonus Army: An American Epic

Reviewed by Emmett Early

The Bonus Army, a 2005 book by two Maryland history writers, is subtitled: *An American Epic*. The authors, Paul Dickson and Thomas B. Allen, describe a period in U.S. history when the War to End All Wars ended on the eve of the Great Depression. The veterans of the era of World War One numbered some 4 million. They were motivated by the archetypal problem of returning war veterans who faced poverty in the aftermath of great sacrifice. The *combat* veterans of that era were a percentage of the actual number of veterans, some of whom had never gone overseas, and others who had but had not encountered combat. But the onset of the Depression accentuated their common struggle to establish themselves after their discharges from military service. A cry went up that the veterans, who had served in combat at a dollar a day, were entitled to a bonus. The feeling was one of injustice. Veterans in the ranks of the unemployed began to converge on Washington, DC. Using diaries and journals, Dickson and Allen catch the populist spirit that brought the veterans to the Capital, first from Oregon, and then from all over the U.S. Each section of the country passing them on, glad to have them pass on their way to DC.

The Principle Players

The authors identify the movement leaders and the controversy surrounding the political implications of the movement of the veterans. The principle players were President Hoover, who played the heavy in the story, finally ordering General Douglas MacArthur to have the marchers expelled from the city. Also key players were the Police Commissioner of the District of Columbia, a veteran himself, Pelham Glassford, a superbly pragmatic man, who kept the visiting veterans supplied with shelters and provisions, and Walter Waters, a man who evolved from veterans' advocate into Fascist leader of the "Khaki Shirts," and John Pace, a veteran who became a Communist and tried to influence the Bonus March.

The Bonus March veterans were finally routed from the city at Hoover's order, carried out by a host of WWII personalities, Douglas MacArthur, George Patton, Dwight Eisenhower. The loss of life was minimal (3 veterans dead), tanks were used to block public access roads, but most of the routing was done by teargas, bayonets, and torch, destroying the camps that the city had established for the veterans.

Sidebars of History

The story emphasizes little sidebars, such as the veteran who had saved Patton's life during the war, being routed and injured in the melee, after being rejected by the future general in a personal confrontation.

The epic of the subtitle develops because the story doesn't end with the rout of the Bonus Marchers in 1932. The news fallout from the assault on the veterans did not help the Hoover Administration, which was reeling from the economic collapse. The burning shacks of the veterans' shantytowns made vivid news photos. The incoming administration of Franklin D. Roosevelt offered the veterans, who scattered to camps all over the country, a chance to participate in government sponsored projects. Hundreds of veterans were offered encampment in the Florida Keys as part of a public works project to build an infrastructure for tourism in an area devastated by the economic collapse. Then in 1935 a fierce hurricane devastated the Keys in the exact location of the veterans' encampment. Over four hundred were killed. Historians Dickson and Allen flesh out the event with observations from Ernest Hemingway, himself a wounded war veteran and living in the Keys. Hemingway wrote a scathing diatribe against the Roosevelt Administration for its coverup of incompetence that led to the deaths of so many veterans in the hurricane. The American Legion also played a key role in sponsoring an investigation of the deaths, although the report was buried in bureaucratic miasma.

The GI Bill

A bonus for this reader was the final chapter of the book, in which the authors describe the ultimate product of the Bonus March and rout, and what I suppose also justifies the subtitle of "epic." Dickson and Allen show how the momentum from bonus bill that finally passed in 1935, ultimately lead to the GI Bill of Rights that was passed during the Second World War, and the beneficial effects of seeding the U.S. culture with hundreds of thousands of college educated middle class veterans. The authors document the fears that academia had of the hordes of blue collar men and women entering colleges and show that academia was in fact envigorated by the veterans. This inertia of veterans' benefits continued through the Korean War.

One of several additional sidebars to *The Bonus Army* was the racial mix of the marchers. The army of WWI was fully segregated, the government feeling that races could not get along. Blacks did serve in combat, but they fought with the French African units in French uniforms. Once they were veterans on the march, perhaps for the first time in US history, Blacks and Whites lived in fully integrated camps...a fact almost totally ignored by the press at the time.

(Continued on p. 7, see *Bonus*)

Bonus, Continued from p. 6)

Critics and Supporters

The racial mix of the Bonus marchers was used as an argument by Congressmen that it was unwise to give money to such people, for they would only squander it and violence would result. When the government sent the marchers off to CCC type camps, they were again segregated by race.

Critics of the veterans march contended that Communists were exploiting the Bonus March and trying to infiltrate the veterans' ranks. Dickson and Allen carefully examined this issue and found that the Communist influence was insignificant, quite in contrast to the public arguments.

The Veterans Administration, just renamed from the Veterans Bureau, played a mixed role in the whole affair. They were complicitous with the army and the Hoover administration in researching names of veterans, after much made of the argument that as many as two-thirds of the marchers were not veterans, but radicals and bums.

The Bonus Army gives a glimpse of the Congressional debate of the time. Wright Patman, himself a veteran, was a repeated sponsor of bonus bills. Prominent in the investigation of the hurricane disaster in the Keys was Edith Nourse Rogers, a Republican Congresswoman from Massachusetts, who hectorred the Roosevelt Administration.

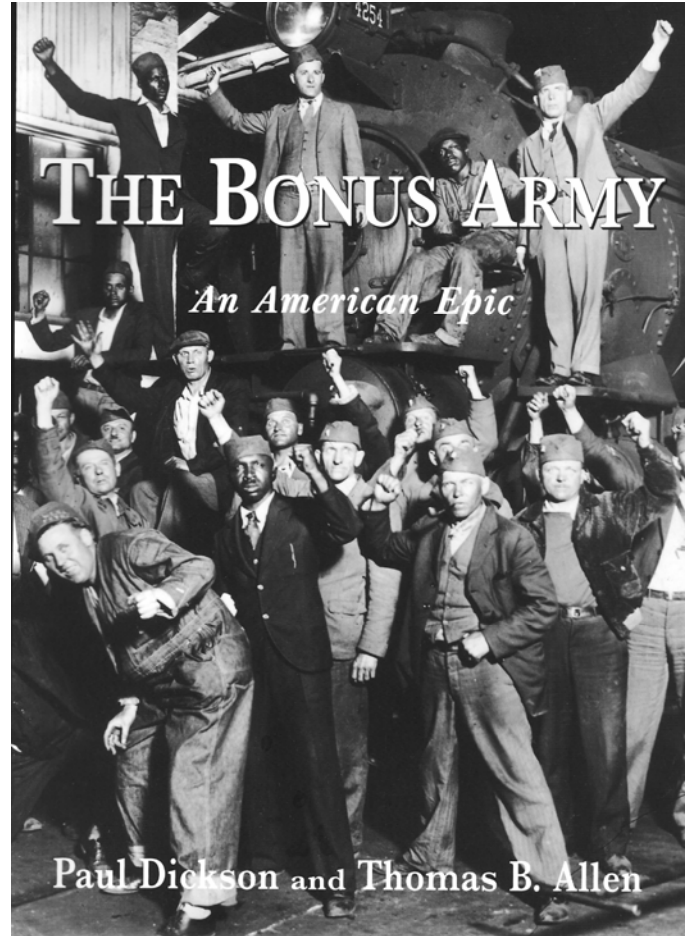
The authors also make a case that the GI Bill was finally passed because of the fear that not 4 million but 20 million WWII veterans would return home angry when they encountered high post war unemployment. The GI Bill offered the veterans an interim support to develop peacetime skills.

The oncoming Second World War stimulated fears that the advances in medical technology, while saving many lives, would send home another army of angry veterans. The authors quote GI Bill historian Michael J. Bennett: "After World War I, virtually every belligerent nation other than Britain and the United States had its government overthrown by its veterans. That didn't happen after World War II, largely because of the Marshall Plan, but there wouldn't have been such a plan if America's 16 million veterans—more than one fourth of the civilian work force—hadn't successfully readjusted to civilian life thanks to the GI Bill" (p. 276). ##

RAQ Retort

The *Journal of Traumatic Stress* doesn't invite comment, but we do. If you find that you have something to add to our articles, either as retort or elaboration, you are invited to communicate via letter or Email. And if you have a workshop or a book experience to tout, rave or warn us about, the RAQ may play a role. Your contributions will make a difference. Email or write to WDVA.

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Dust cover of *The Bonus Army: An American Epic*, by Paul Dickson and Thomas B. Allen, published in 2005 by Walker and Company. This scene is taken during the veterans' odyssey across the US by rail and truck during the early 1930s.

Traumatic Brain Injury Called the Signature Wound of the War in Iraq

Wounded soldiers arriving at Walter Reed Hospital have been assessed for traumatic brain injury because of the high numbers of casualties who are protected by body armor. *USA Today* [by Gregg Zoroya, 3/7/2005], quoted doctors at Walter Reed who liken the disorder to "shaken baby syndrome" which is a disorder incurred when the head recoils violently to a blow. Doctors report that 60% of the 437 wounded were diagnosed with the disorder. An even larger percentage (83%) was reported at Bethesda Naval Medical Center among wounded marines.

Symptoms of traumatic brain injury may vary. They include headaches, sensitivity to light or noise, behavior changes, impaired memory, and a loss of problem solving ability. Severe behavior changes may include loss of ability to talk and walk. ##

Book Review:

A Cold Treachery: A War Veteran Murder Mystery

Reviewed by Emmett Early

A Cold Treachery (2005) is a fine novel by mystery writer Charles Todd. It is set in the rural Lake District in England just after the First World War. A sheep farmer and his family have been found brutally murdered: three children, mother and father all shot with a large caliber pistol, only the oldest, a 10-year-old boy, missing. The local police enlist a Scotland Yard detective who happens to be finishing a case nearby. What is most interesting about the story is the involvement of war veterans. Inspector Rutledge is a combat veteran of four years in the trenches. He is haunted by the deaths of the men under his command to the extent that he has an imaginary travelling companion in the voice of a late Scottish trooper. The reader at first does not know that the running commentary is not coming from a real passenger as Inspector Rutledge drives through a winter snowstorm to the murder scene. "A presence that was the embodiment of too much horror piled on horror. The product of shell shock. The legacy of war" (p. 18)

The murdered family also has a war veteran connection. The murdered man is Elcott, who married a woman he thought was a war widow with two children, but turned out that her first husband returned late after having been a POW. "Her husband had survived in a German camp, and came home to find his family gone" (p. 46). She now had twins by her second husband. The former POW, Robinson, was gracious and moved away, leaving his wife and children with Elcott. "The war had changed him (Robinson), he said, and he didn't know how to begin again. It was rather sad" (p. 47).

Rutledge, the Scotland Yard detective, is housed at the local hotel (more of a rooming house) in Urskdale. The housekeeper, a Miss Fraser, is in a wheelchair and Rutledge compares her infirmity to his shell shock. The owner of the hotel is an alcoholic woman who began drinking when her husband was away at war. The housekeeper says, "Not to put too fine a point on it. She began to drink while Harry was in France, and couldn't stop when he came safely home" (p. 53).

Although Detective Rutledge was sick of his work, he had stumbled back into his career after the war, he was forced to continue. "He thought of all the suffering he'd witnessed in the war—in the course of his duties. He was abruptly tired of judging, of looking at the cruelty of violent death. He was tired of probing

into the souls of people and digging out the nasty secrets he found there. This kitchen, with its cozy warmth, its small pleasures shouldn't be the forum for questioning the motives of murderers.

"He found himself longing for the ordinary life that most men lived, with a wife—children—a house with a small garden. But what could he bring to such domestic scenes? A haunted mind, an overfamiliarity with death, a burdened conscience..." (pp. 159-160).

A Cold Treachery is a suspenseful drama of searching for clues among an abundance of suspects in the farm community, where if one is not born on the land one is considered an outsider. The missing boy turns up, but eludes detection, and no one knows if he killed his family, or witnessed the murders and fled into the snow storm. To further complicate things a person convicted of murder in the military, a man who shot his sergeant, (whom the murdered man testified against) has escaped and is at large.

All the time Rutledge is interviewing and criss crossing over the circumstances of the crime, Hamish, the voice of the dead Scotsman, is commenting. "Hamish grunted, as if agreeing with Rutledge's thoughts. 'War changed us.'

"And the simple words carried a wealth of misery" (p. 186).

Charles Todd writes with sensitivity about the burden of Rutledge's survivor's guilt. The word 'duty,' for example, rings a bell. "As for duty, Rutledge understood that all too well. He had sent young, green men into the heat of battle, because it was their turn to fight. He had had to close his eyes to the fact that they would surely die. In the end, chance had made the final choice. Or so he had tried to tell himself as he reported the long lists of the dead and missing" (p. 192).

The recent war was everyone's common referent. The crippled housekeeper, who turns out to have an hysterical paralysis following an accident, engages Detective Rutledge in a dialog about guilt. She had been tried and found not guilty of murdering her former lover, a conscientious objector. The author draws a fearsome collection of difficult roles in wartime. "Conscientious objectors and cowards, even men who had suffered from shell shock, were despised by people who had watched sons and fathers and brothers mown down in France" (p. 286).

Detective Rutledge suffers sleep disturbances. He mixes nightmares of the crime he is investigating and his own war memories, much like a war veteran service officer or counselor. Charles Todd keeps the reader engaged until the last pages and creates a mystery novel of the sort that I regretted finishing.

##

Review Analyzes PTSD Therapy Outcome Research —Finds Procrustian Bed

A group of Emory University psychologists tackled “A Multidimensional Meta-Analysis of Psychotherapy for PTSD.” They published their results in the *American Journal of Psychology* [2005, 162(2), 214-227]. Rebekah Bradley and associates reviewed controlled trials using adults as subjects from 1980 to 2003 of psychotherapy for PTSD, looking particularly at the generalizability of the results. The authors examined a sample of 26 studies that included 44 treatment conditions, including exposure based and cognitive therapies, as well as combined cognitive-behavioral therapies and eye-movement desensitization and reprocessing. The authors concluded “that psychotherapy for PTSD produces substantial effects” (p. 221). “Across all treatments, 56% of all those who entered treatment, including those who did not complete the study...and 67% of the patients who completed treatment no longer met criteria for PTSD post-treatment...” (p. 222). Bradley, et al, write, “Thus, the average patient showed clinically meaningful improvement, particularly relative to wait-list control condition patients, although these posttreatment means suggest considerable residual symptoms” (p. 222).

Short Follow-ups

The authors are critical of several aspects of the outcome research studies they reviewed. They note that “given the relative durability of PTSD symptoms over time,”... “the majority of follow-up studies assessed outcome only at 6 months, with only two assessing outcome as far as 12 months post-treatment” (p. 223). They noted also that the type of trauma was a “significant predictor of pre-versus posttreatment effect size” and that “the combat group showed the least change” (p. 223).

Bradley, et al., discuss their results. “On average, the brief psychotherapy approaches tested in the laboratory produce substantial improvements for patients with PTSD. Of patients who complete treatment, 67% no longer meet criteria for PTSD, and of those who enter treatment (whether or not they complete), the recovery rate is 56%. These findings are particularly impressive given that PTSD is often a chronic disorder.” The authors cautiously observe that data suggest that those who do not get better tend to drop out of the studies (p. 223).

Selectivity Reduces Generalizability

The Emory University researchers critiqued the selective nature of PTSD outcome research. “Clinical trials for PTSD have excluded roughly 30% of patients referred for treatment.” They note, “Our preliminary finding of a positive relationship between number of exclusion criteria and outcome suggests caution in unqualified generalization about treatment of choice for patients with PTSD, who are a very heterogeneous group” (p. 224).

The authors added that the issue of common comorbidity of other Axis I and II disorders with PTSD is seldom addressed in outcome studies. “Also worth noting is that none of the studies addressed the issue of treatment of PTSD with comorbid psychotic symptoms, despite research indicating that PTSD and psychotic symptoms commonly co-occur.... Ruling out psychosis (typically without reliability of the determination reported) is also not always a simple matter in patients with severe or complex PTSD” (p. 224).

Symptom Severity Modifies Success

Bradley, et al, speculate about the reasons why combat veterans as a group showed the smallest effect size. They suggest a greater level of pathology among VA PTSD patients, the tendency to limit disclosure, and the possibility of secondary gain from disability benefits. They note that in general, outcome research is problematic in light of research suggesting few studies report on complete trauma history and that “history of prior or multiple traumatic events affects severity of PTSD and response to subsequent traumas” (p. 224).

Comparison Groups Found Wanting

A further limitation to the generalizability of outcome research in the treatment of PTSD, the authors suggest, is the “widespread use of wait-list and inert control conditions.” Bradley, et al, find this practice “highly problematic, as such control conditions do not rule out the common factors...that constitute the major threat to internal validity of these studies and do not control obvious confounds such as clinician commitment and belief in the treatment” (p. 226). Bradley, et al, advocate that further outcome research compare “genuine therapies with committed therapists, preferably treatments as practiced in the community, working with samples of patients resembling those seen in the community. If researchers hope to convince experienced clinicians to make greater use of treatments studied in the laboratory, they need to demonstrate that such treatments are in fact superior to what clinicians are already doing in private practice and other settings with the opportunity for more open-ended care” (p. 226).

Procrustian Bed

The term is derived from one of the Labors of Heracles. The highwayman, Procrustes, was a giant who waylaid travelers on the road to Athens. He forced them to stretch out in an iron bed, and if any part of the traveler stuck out over the edge, he chopped it off. Heracles killed Procrustes and the giant's bed went on display forever after as an example of institutional restrictions. EE ##

Movie Review:***Legends of the Fall: Epic Drama with Odyssean Theme***Reviewed by Emmett Early

There is a moving scene in the last book of *Homer's Odyssey* when Odysseus is standing together with his father, Laertes, and his son, Telemachus, facing off against the angry men of Ithaca out to avenge their slain family members, the rude and boisterous suitors of Queen Penelope. Laertes is thrilled that his son and grandson are standing beside him: "Laertes called out in deep delight, 'What a day for me, dear gods! What joy--my son and my grandson vying over courage!'" [Robert Fagles, trans, book 24, lines 565-567].

Epic War Veteran Drama

I was reminded of that scene when I watched Edward Zwick's epic war veteran drama *Legends of the Fall*, which concerns a U.S. Cavalry officer, Colonel Ludlow (Anthony Hopkins), who becomes so disillusioned with the government over mistreatment of Native Americans during the so-called Indian Wars that he throws down his sword and resigns from the army. He moves to Montana and establishes a prosperous ranch, raising three sons, but losing his wife, Isabel, who can't stand the frontier life and moves away. The movie jumps ahead to see the three sons as hardy young men working the cattle herds: Alfred, the oldest is played by Aiden Quinn. The middle son is Tristan, played by Brad Pitt, who warranted first billing for his starring role. The youngest is Samuel (Henry Thomas) who is shown arriving back to the ranch on the train with his beautiful fiancé, Susanna (Julia Ormond), who seems to immediately exchange meaningful glances with Samuel's siblings.

World War I

The arrival scene is set in 1913. Samuel is enthralled by news stories of German aggression and manages to eventually talk his brothers into riding off to Canada to join the fight, much against their father's expressed opposition. Battle scenes of WWI follow in which Alfred is wounded and Samuel is killed. Samuel has been protected by Tristan, but when the latter is drawn off to the aid tent with Alfred, Samuel goes off on a raid and is killed. Tristan then goes berserk in the tradition illustrated by Jonathan Shay's *Achilles in Vietnam*. Tristan kills Germans with his knife, paints his face with enemy blood, takes scalps, and finally takes out Samuel's heart to be returned home in a box and buried in their ranch.

The contrast between the surviving brothers is remarkable in terms of war veteran readjustment. Alfred, who was wounded in the leg returns home and becomes an exemplary citizen, moving to Helena (after being snubbed by Susanna, who has remained on the ranch waiting, first for her fiancé (Samuel), then for her lover Tristan) succeeding in business and then entering politics. Tristan, carrying the guilt of his

brother's death, goes to sea and pursues a wanderlust of adventure. Although he has wild times, he seems numb and sends Susanna a note saying that he is dead and she must move on. He finally returns to express his grief at Samuel's grave and strike up a passionate affair with Susanna. Alfred, in his ambition, embraces government and alienates his war veteran father, who thinks government has neither wisdom nor humanity. The old Colonel has a stroke and Anthony Hopkins, as Ludlow, expresses a passionate man whose body is twisted, struggling to express himself.

Bart the Bear

Legends introduces the symbol of the bear (played by Bart the Bear), who attacks Tristan as a boy. Tristan chops off the bear's claw as it strikes--an act of desperate defense. The bear takes on added meaning when Tristan finally returns after his odyssey and seems to be a symbol, a personification of the wildness released by combat that stalks the veteran as he walks the wilderness.

Although she loves Tristan, Susanna marries Alfred after Tristan's travels keep him away too long. Tristan then marries a Native girl, Isabel 2, who is the daughter of the ranch employees. She is named after the Colonel's abandoning wife. Isabel 2 has grown up on the ranch and has always loved Tristan. She is played by Sekwan Auger as an adolescent, and Karina Lombard as an adult.

The Odyssean Clash

The Odyssean clash of the warriors comes when Tristan competes with gangsters smuggling booze from Canada during Prohibition. Alfred seems corrupted by the gangster money, but when the clash comes, the Colonel teams up with Tristan and Alfred, along with loyal ranch hands, and they shoot it out with the gangsters and dishonest cops. The gangsters clearly deserve their fate after killing Tristan's wife.

Alfred and Susanna cannot redeem their marriage. Susanna commits suicide in her grief over the loss of Tristan and her inability to produce children. Alfred says to Tristan, "I followed all the rules--man, God. You followed none, and they all loved you more."

Legends was filmed in Montana and Canada. It has the scope of an American epic that crosses borders, and as a war veteran film it ranks as one of the more comprehensive in dealing with two generations of war veterans, and three different kinds of outcomes: Tristan, the guilt-driven, alienated bearman, who seems emotionally numb until he explodes in fury, unmercifully beating men who enrage him, (his rage is always sorely provoked, but so sudden it flashes), and Alfred, the Helena politician, who does everything he can to fit in and profit, and the Colonel, who rejects his government, recedes to the west, and tries to live independently by his own rules. ##

Film Review:***Thieves' Highway*—Fighting His Father's Battles**

Reviewed by Emmett Early

There are some films that don't exploit the war veteran as protagonist, but instead subtly state his veteran's heritage. In *Thieves' Highway* a truck driver trying to survive in a rundown market hauls a load of apples to the San Francisco produce market where his father was cheated, and as a result, lost his legs in an accident. Richard Conte plays Nick, who is befriended by a prostitute at the market when his truck is sabotaged by the graft-ridden thieves there. The screenplay by A.I. Bezzerides was adapted from his novel, *Thieves' Market*.

Nick enters the picture as his father is dying. It appears he's been away since the war, but his veterans' status is unstated until his sizzling repartee with the Italian hooker, Rika, played with great charm and wit by Valentina Cortesa. Nick says that he went swimming "in a place called Anzio," the site of an allied invasion of Italy. She says of Nick, as tough as he's been, "how do you feel inside when you look like glass?"

Released in 1949, *Thieves' Highway* was directed by Jules Dassin with lots of action and drama charging a complex plot. The chief thief is the produce dealer, Mike Figlia, played by Lee J. Cobb. He cheats Nick and deals with other produce agents in spontaneous buying and selling. Dassin also directed the successful urban noir crime dramas *Night and the City*, set in London, and *Riffie*, set in Paris. *Thieves' Highway* has terrific action sequences involving the produce trucks, one a 1930s vintage open cab that seems to be falling apart and eventually crashes, and the another, a surplus WWII six-by that collapses on top of Nick when he tries to repair a tire. The highway scenes seem quaint, set in post-WWII California, and feature some harrowing races with competitors to market with the truckload of golden delicious. The pre-freeway scenes of the San Francisco Ferry terminal and the embarcadero at the foot of Market Street are visions of yesteryear.

The Odyssean Ring

The basic plot has an Odyssean ring to it. Nick has been away since the war, and when he returns, his father is crippled and dying and Nick must restore his father's business by taking a shipment directly to the source the corruption that injured his father. There, dog tired from driving many hours (Fresno to SF in the days before the Interstate highways), he is taken in by Ricka, who is an agent of the corrupt produce dealer, where he collapses in sleep. He has a significant rapport with Ricka and she awakens him when she realizes that Mike Figlia is selling his produce off his sabotaged truck. Nick wins the love of Ricka and defeats the evil produce baron with his tough, steadfast, dogged perseverance. ##

***Little Dieter Needs to Fly*, a film by Werner Herzog, is featured at Chelan Conference**

German film director Werner Herzog is a unique talent in an industry with a wide range of talents. Herzog's films feature somber dramas of endurance and inspiration. His earlier work, *Aguirre, Wrath of God*, was a dramatic adventure of a Spanish Conquistador in South America, searching for the City of Gold. Aguirre quarrels with the other leaders of the expedition, breaks off with a contingent, and along with his beautiful wife, drifts down a river on a flotilla of rafts. As they travel they are gradually picked off, shot by arrows from unseen assailants. Aguirre finally goes mad as his wife is killed. We had a large poster of *Aguirre, Wrath of God* in the Seattle Vet Center hallway.

Herzog's film crew is said to be a devoted team that travels the world with him. In *Fitzcarraldo*, he filmed a jungle trek over a mountain, towing a large ferry boat to a lake, recreating an historic misadventure. In *La Soufriere*, he took his crew to an active and eminently explosive volcano on a Caribbean Island that had been evacuated. His scenes of the deserted towns and the sulfurous smoke are haunting.

Little Dieter is a documentary, released in 1998, that maintains that unique, reverential tone. Herzog can be heard off camera at times, in somber voice-over. Dieter Dangler was a child when allied bombers and fighters attacked his town. He was so impressed with the experience that he knew he needed to fly. To this end he emigrated to the U.S.A. and joined the air force, where the closest he got to a flight line was as a chow hall cook. He was discharged, went to college, and joined the navy to become a pilot. Dieter, a middle aged man, narrates his descent into hell as he is shot down over Laos, captured, tortured and abused for two years of jungle marches, starvation, and imprisonment. When he finally escapes, he is treated as a returning hero by the crew of his aircraft carrier.

Dieter, as a middle-aged Vietnam veteran, retired test pilot, narrates his story from his mountain top vista home and from the jungles of Laos where he goes with Herzog and his crew to demonstrate his ordeal. As he talks about his life, we see the posttraumatic symptoms: his obsessive-compulsive ritual of opening doors, his need to keep his freedom in evidence from his vista atop Mount Tamalpais. At times he appears to be overwhelmed with the emotion of the scenes he is recalling. Herzog juxtaposes scenes of young Dieter in uniform after his return, and the haggard, emaciated body of Dieter immediately after his rescue.

In one of Herzog's most impressive works, he tells the story of Kaspar Hauser (*Every Man for Himself, and God Against All*), who is rescued from his basement prison after living his entire life there deprived of culture. He becomes a savant sensation with his unique, fresh perspective on society. Werner Herzog has that talent. His *Little Dieter Needs to Fly* gives us a unique prism with which to view our own personal struggles with war and its wake of memories. EE ##

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Tom Schumacher.....	360 586 1076
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To be considered for service by a WDVA or King County contractor, a veteran or veteran's family member must present a copy of the veteran's discharge form DD-214 that will be kept in the contractor's file as part of the case documentation. Occasionally, other documentation may be used prove the veteran's military service. You are encouraged to call Tom for additional information.

It is always preferred that the referring person telephone ahead to discuss the client's appropriateness and the availability of time on the counselor's calendar. Contractors are all on a strict and tight monthly budget, however, contractors in all areas of the state are willing to discuss treatment planning.

Many of the program contractors conduct both group and individual/family counseling. ##

King County Veterans Program Contractors and Therapists

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Director of the King County Veterans Program is Joel Estey.

Frank Kokorowski, MSW, is a King County employee and the Program's full-time clinician.

King County Veterans Program, which also provides vocational counseling and emergency assistance, is located at 123 Third Ave. South, Seattle, WA....206 296 7656.

The King County program works in cooperation with WDVA to provide counseling and evaluations to veterans incarcerated in King County.

The Repetition & Avoidance Quarterly is published each season of the year by The Washington Veterans PTSD Program, of the Washington Department of Veterans Affairs. The PTSD Program's director is Tom Schumacher. The editor of the *RAQ* is Emmett Early. It is intended as a contractors' newsletter for the communication of information relevant to the treatment of PTSD in war veterans and their families. Your written or graphic contribution to the PTSD Program newsletter is welcomed if it is signed, civilized, and related to our favorite topics of PTSD and war veterans. Contributions may be sent by mail to the Washington Department of Veterans Affairs (Attn: Tom Schumacher), PO Box 41150, Olympia, WA 98504, or by Email directly to <emmett@dva.wa.gov>. Readers are also invited to send in topical research or theoretical articles for the editorial staff to review. Comments on items reported in the *RAQ* are also encouraged and will likely be published if they are signed. To be included in our mailing list, contact WDVA, Tom Schumacher, or Emmett Early. The *RAQ* can also be read online by going to www.dva.wa.gov Once in the WDVA website, click on PTSD, and once on the PTSD page, scroll to where you find access to the *RAQ*. The newsletter logo is a computerized drawing of a photograph of a discarded sign, circa 1980, found in a dump outside the La Push Ocean Park Resort. ##